Case 17-09136 Doc 1 Filed 03/22/17 Entered 03/22/17 17:45:10 Desc Main Document Page 1 of 49

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on	Genita		
	your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name		First name
		Middle name	_	Middle name
		Wilson		
		Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of			
J .	your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6905		

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Case number (if known)

Debtor 1 Genita Wilson

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 14536 S. Union Riverdale, IL 60827 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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art	Tell the Court About	Your Ba	ankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice Requir</i> of page 1 and check the app	ed by 11 U.S.C. § 342(b) for Individual Formation of the second of the s	duals Filing for Bankruptcy		
	choosing to file under	☐ Ch	napter 7						
		☐ Cr	napter 11						
		☐ Ch	napter 12						
		■ Ch	napter 13						
3.	How you will pay the fee		about how yo	ou may pay. Ty attorney is sub	pically, if you are paying the	e check with the clerk's office in yo fee yourself, you may pay with cas ur behalf, your attorney may pay w	sh, cashier's check, or money		
					stallments. If you choose thints (Official Form 103A).	f you choose this option, sign and attach the Application for Individuals to Pay			
			but is not requapplies to you	uest that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty less to your family size and you are unable to pay the fee in installments). If you choose this option, you must application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.					
			the Application	on to Have the	Chapter / Filing Fee Walved	(Official Form 103B) and file it wil	th your petition.		
€.	Have you filed for bankruptcy within the	■ No							
	last 8 years?	☐ Ye							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	3.						
			Debtor			Relationship to	you		
			District		When	Case number,	if known		
			Debtor			Relationship to	you		
			District		When	Case number,	if known		
11.	Do you rent your residence?	■ No	■ No. Go to line 12.						
	residence:	☐ Ye	s. Has yo	our landlord obt	tained an eviction judgment	against you and do you want to sta	y in your residence?		
				No. Go to line	e 12.				
				Yes. Fill out II bankruptcy pe		iction Judgment Against You (Forn	n 101A) and file it with this		

Document Page 4 of 49 Case number (if known) Debtor 1 **Genita Wilson** Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Genita Wilson Page 5 of 49 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit
counseling agency within the 180 days before I filed
this bankruptcy petition, and I received a certificate of completion.
oon production

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Genita Wilson		Document	Page 6 of 49	number (if known)					
		ione for De	a anti-a m Duma a a a a							
Pari 16.	t 6: Answer These Quest What kind of debts do		Are your debts primarily consume	er debts? Consumer debts a	are defined in 11 U.S.C. § 101(8)	as "incurred by an				
	you have?	i	ndividual primarily for a personal, fa —		•					
			☐ No. Go to line 16b.							
			Yes. Go to line 17.							
				ness debts? Business debts are debts that you incurred to obtain nent or through the operation of the business or investment.						
		1	☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c	State the type of debts you owe that	t are not consumer debts or l	ousiness debts					
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter 7. Go t	o line 18.						
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. Do you are paid that funds will be available			inistrative expenses				
	administrative expenses	1	□ No							
	are paid that funds will be available for		□ Yes							
	distribution to unsecured creditors?									
18.	How many Creditors do	1 -49		1 ,000-5,000	□ 25,001-50,000					
	you estimate that you owe?	□ 50-99		□ 5001-10,000 □ 40,004,05,000	□ 50,001-100,000					
		☐ 100-199 ☐ 200-999	•	☐ 10,001-25,000 ☐ More than100,000						
19.	How much do you	□ \$0 - \$50	0,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 -	\$1 billion				
	estimate your assets to be worth?		. φ.ου,ουυ	□ \$10,000,001 - \$50 million						
			σι φοσο,σσο	□ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 milli						
		— \$500,00	☐ \$500,001 - \$1 million ☐ \$100,000,001 - \$500 million ☐ More than \$50 billion							
20.	How much do you estimate your liabilities	□ \$0 - \$50		□ \$1,000,001 - \$10 million	\$500,000,001 -					
	to be?			□ \$10,000,001 - \$50 millior □ \$50,000,001 - \$100 millio						
			+,	□ \$100,000,001 - \$500 milli	billion					
Par	t7: Sign Below									
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.								
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.								
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request re	elief in accordance with the chapter	of title 11, United States Coo	de, specified in this petition.					
		bankruptcy and 3571.	nd making a false statement, concear case can result in fines up to \$250							
		/s/ Genita	/ilson	Signature of	Debtor 2					
		Signature	of Debtor 1							
		Executed of		Executed or						
			MM / DD / YYYY		MM / DD / YYYY					

Debtor 1 Genita Wilson Page 7 of 49 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Tina Tran	Date	March 22, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Tina Tran		
Printed name	·	·
Needle & Thread Law LLC		
Firm name		
9212 South Stony Island Avenue		
Chicago, IL 60617		
Number, Street, City, State & ZIP Code		
Contact phone (773) 609-3637	Email address	ttran@needlethreadlaw.com
6321638		
Bar number & State		

Debtor 1	Genita Wilson		
	First Name	Middle Name	Last Name
Debtor 2			
Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS
Case number			
if known)			

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	45,285.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	23,400.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	68,685.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	27,482.60
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	97,882.00
	Your total liabilities	\$	125,364.60
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,994.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,214.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Page 9 of 49
Case number (if known) Debtor 1 Genita Wilson

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,095.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	57,370.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	57,370.00

	Ca	se 17-09136	Doc 1)3/22/17 iment	Entered 03/22/17 Page 10 of 49	7 17:45:10	Des	sc I	Main
FIII	in this inform	nation to identify yo	ur case and tl	his filing:						
Deb	otor 1	Genita Wilson First Name	Middl	le Name		Last Name				
	otor 2 ouse, if filing)	First Name	Middl	le Name		Last Name				
Uni	ted States Ba	nkruptcy Court for the	e: NORTHER	RN DISTR	ICT OF ILLIN	IOIS				
Cas	se number _					-				Check if this is an amended filing
_		rm 106A/B								
<u>Sc</u>	chedul	e A/B: Pro	perty							12/15
nfor	mation. If more wer every ques	e space is needed, atta tion.	ich a separate s	sheet to thi	s form. On the	e are filing together, both are e e top of any additional pages, v n or Have an Interest In				
. D	o you own or h	ave any legal or equita	able interest in a	any reside	nce, building,	land, or similar property?				
	No. Go to Par	2.								
	Yes. Where is	s the property?								
1.1	14536 S. L	Inion		What is	s the property	? Check all that apply				
		if available, or other descrip	tion	_	Single-family h Duplex or mult		Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i> :			
				ш	Condominium	Creditors Who Have Claims Secured by Pr			cured by Property.	
					Manufactured	or mobile home				
	Riverdale	IL 6	0827-0000		Land		Current value of tentire property?	he		rrent value of the tion you own?
	City	State	ZIP Code	_	Investment pro	pperty	\$45,285	5.00	_	\$45,285.00
				_	Timeshare Other					wnership interest
				_		in the property? Check one	a life estate), if kr		ncy	by the entireties, or
				_	Debtor 1 only					
	Cook			_	Debtor 2 only					
	County			_	Debtor 1 and E	·	☐ Check if this		nuni	ty property
				At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:						

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$45,285.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1 <u>G</u>	Senita Wilson		Document	Page 11 of 49	Case number (if known)	
3. C a	ars, vans,	, trucks, tractors,	sport utility veh	nicles, motorcycles			
	No						
	Yes						
0.4	Malaa	Chevrolet		Miles has an interest in the		Do not deduct sec	ured claims or exemptions. Put
3.1	Make: Model:	Impala		Who has an interest in the Debtor 1 only	ne property? Check one	the amount of any	secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2014		Debtor 2 only		Current value of	
	Approxir	nate mileage:	58,365	Debtor 1 and Debtor 2	only	entire property?	portion you own?
	Other in	formation:		At least one of the deb	tors and another		
				Check if this is comm (see instructions)	nunity property	\$21,900	9.00 \$21,900.00
Part Do y	ages you 3: Descri	have attached for be Your Personal are bringer have any legal goods and furnis	r Part 2. Write to nd Household Ite or equitable into	n for all of your entries f hat number here ms erest in any of the follow china, kitchenware			\$21,900.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
	Yes. De	escribe					
		Fu	rniture				\$1,000.0
E	,	Televisions and ra including cell phor		o, stereo, and digital equ edia players, games	ipment; computers, print	ters, scanners; music c	ollections; electronic devices
E	xamples:	s of value Antiques and figur other collections, i			ooks, pictures, or other a	art objects; stamp, coin	or baseball card collections;
		escribe					
E	xamples:	for sports and he Sports, photograph musical instrumen	hic, exercise, and	d other hobby equipment;	bicycles, pool tables, g	olf clubs, skis; canoes	and kayaks; carpentry tools;
	No Yes. De	escribe					
	•	: Pistols, rifles, sho	otguns, ammuniti	ion, and related equipmer	nt		
	l _{No} l Yes. De	escribe					

Official Form 106A/B Schedule A/B: Property page 2

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☐ Yes. Give specific information about them

Issuer name:

■ No

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Case number (if known) Document **Genita Wilson** 21. Retirement or pension accounts

	Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans							
	■ No							
	☐ Yes. List each acco	ount separately. Type of account:	Institution name:					
		-						
22.		sed deposits you have made so that y	ou may continue service or use from a company utilities (electric, gas, water), telecommunications companies,	or others				
	Yes		Institution name or individual:					
23.	Annuities (A contract ■ No	t for a periodic payment of money to yo	ou, either for life or for a number of years)					
		Issuer name and description.						
24.	Interests in an educa 26 U.S.C. §§ 530(b)(1 ■ No	ntion IRA, in an account in a qualifie), 529A(b), and 529(b)(1).	d ABLE program, or under a qualified state tuition progra	m.				
	☐ Yes	Institution name and description. Sepa	arately file the records of any interests.11 U.S.C. § 521(c):					
25.	Trusts, equitable or ■ No	future interests in property (other the	nan anything listed in line 1), and rights or powers exercis	able for your benefit				
	☐ Yes. Give specific i	information about them						
26.		trademarks, trade secrets, and oth- omain names, websites, proceeds from						
	_	information about them						
27.	Examples: Building p	s, and other general intangibles permits, exclusive licenses, cooperative	e association holdings, liquor licenses, professional licenses					
	■ No □ Yes. Give specific i	information about them						
M	oney or property owe	d to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.				
28.	Tax refunds owed to	o you		·				
	■ No							
	☐ Yes. Give specific in	nformation about them, including whet	her you already filed the returns and the tax years					
29.	Family support Examples: Past due	or lump sum alimony, spousal support	, child support, maintenance, divorce settlement, property sett	lement				
	☐ Yes. Give specific in	nformation						
30.			isability benefits, sick pay, vacation pay, workers' compensati se	ion, Social Security				
	Yes. Give specific	information						
31.	_	ce policies sability, or life insurance; health saving	gs account (HSA); credit, homeowner's, or renter's insurance					
	■ No		Managhar					
	□ Yes. Name the insu	rance company of each policy and list Company name:	its value. Beneficiary:	Surrender or refund value:				

Debtor 1

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Case number (if known) Debtor 1 **Genita Wilson** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$0.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$45,285.00 56. Part 2: Total vehicles, line 5 \$21,900.00 57. Part 3: Total personal and household items, line 15 \$1,500.00 58. Part 4: Total financial assets, line 36 \$0.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$23,400.00 Copy personal property total \$23,400.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$68,685.00

		17(7(3)111)	<u> </u>	-
Fill in this info	rmation to identify your	case:		
Debtor 1	Genita Wilson			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

 Which set of exemptions are you claiming? Check one only, even if your spouse is filing w

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
\$45,285.00		\$15,000.00	735 ILCS 5/12-901	
		100% of fair market value, up to any applicable statutory limit		
\$21,900.00		\$2,400.00	735 ILCS 5/12-1001(c)	
		100% of fair market value, up to any applicable statutory limit		
\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$500.00		\$500.00	735 ILCS 5/12-1001(a)	
		100% of fair market value, up to any applicable statutory limit		
\$0.00		\$0.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
	\$45,285.00 \$45,900.00 \$1,000.00	\$45,285.00	\$45,285.00 \$15,000.00 \$100% of fair market value, up to any applicable statutory limit \$1,000.00 \$100% of fair market value, up to any applicable statutory limit \$1,000.00	

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Debtor 1 Genita Wilson

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

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Fill in this informat	ion to identify you	ur case:				
Debtor 1	Genita Wilson					
_	First Name	Middle Name	Last Name			
Debtor 2	F:	A. I. I. A.				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankro	uptcy Court for the	: NORTHERN DISTRICT OF ILLIN	NOIS			
Case number						
(if known)					☐ Chec	k if this is an
					amen	nded filing
O(() -1 -1	1000					
Official Form 1	106D					
Schedule D	: Creditors	s Who Have Claims S	ecured	by Property	У	12/15
Re as complete and ac	curate as nossible	If two married people are filing together	hoth are equ	ally responsible for su	nnlying correct inform	ation If more snace
		out, number the entries, and attach it to				
. Do any creditors have	ve claims secured b	y your property?				
□ No. Check thi	s box and submit t	his form to the court with your other se	chedules. Yo	u have nothing else t	report on this form.	
Yes Fill in all	of the information	helow				
		below.				
	ecured Claims			Column A	Column B	Column C
		more than one secured claim, list the credit s a particular claim, list the other creditors in		Amount of claim	Value of collateral	Unsecured
		ical order according to the creditor's name.		Do not deduct the	that supports this	portion
2.1 Ally Financia	al .	Describe the property that secures the	o claim:	value of collateral. \$27,482.60	s21,900.00	If any \$5,582.60
2.1 Ally Financia Creditor's Name	<u> </u>	Describe the property that secures the 2014 Chevrolet Impala 58,365		Ψ21,402.00	\$21,900.00	φ3,362.00
		2014 Chevrolet Impala 30,303	IIIIes			
P.O. Box 380	903	As of the date you file, the claim is: Chapply.	neck all that			
Minneapolis	, MN 55438	Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mo	ortgage or secu	ıred		
Debtor 2 only		car loan)				
Debtor 1 and Debto	r 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
☐ At least one of the o	-	☐ Judgment lien from a lawsuit	•			
☐ Check if this claim community debt		Other (including a right to offset)				
Date debt was incurre	os/01/2014	Last 4 digits of account numbe	er <u>6905</u>			
Add the deller of		National A on this ways. Maits that	u basa	607.40	2.60	
	=	Column A on this page. Write that numbe the dollar value totals from all pages.	er nere:	\$27,48		
Write that number h		the donar value totals from all pages.		\$27,48	2.60	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Write that number here:

		Docume	ent Page 1	8 of 49			
Fill in th	is information to identify	your case:					
Debtor 1	Genita Wilso	n					
D. I	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if,		Middle Name	Last Name				
United S	States Bankruptcy Court for	the: NORTHERN DISTRICT	OF ILLINOIS				
Case nu (if known)	mber				☐ Check if this is an amended filing		
	al Form 106E/F dule E/F: Creditor	s Who Have Unsec	ured Claims		12/15		
any execu Schedule Schedule left. Attac	Itory contracts or unexpired I G: Executory Contracts and I D: Creditors Who Have Claim	eases that could result in a claim Unexpired Leases (Official Form a s Secured by Property. If more s	. Also list executory of 106G). Do not include pace is needed, copy	Part 2 for creditors with NONPRIORI' contracts on Schedule A/B: Property any creditors with partially secured the Part you need, fill it out, number do not file that Part. On the top of an	(Official Form 106A/B) and on claims that are listed in the entries in the boxes on the		
Part 1:	List All of Your PRIORIT	TY Unsecured Claims					
1. Do a	ny creditors have priority uns	ecured claims against you?					
■ N	o. Go to Part 2.						
□ Y	es.						
Part 2:	List All of Your NONPR	IORITY Unsecured Claims					
3. Do a	ny creditors have nonpriority	unsecured claims against you?					
□N	o. You have nothing to report in	this part. Submit this form to the co	ourt with your other sche	edules.			
■ Y	es.						
unse	cured claim, list the creditor sep one creditor holds a particular c	parately for each claim. For each cla	im listed, identify what t	wholds each claim. If a creditor has m ype of claim it is. Do not list claims alre three nonpriority unsecured claims fill	ady included in Part 1. If more		
					Total claim		
4.1	ACS/Goal Financial	Last 4 digit	s of account number	6905	\$3,750.00		
;	Nonpriority Creditor's Name 501 Bleeker St. Utica, NY 13501	When was t	the debt incurred?	01/12/2005			
٦	Number Street City State Zlp Co Who incurred the debt? Check		ate you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Continge	ent				
	Debtor 2 only		☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors a	and another Type of NO	NPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a	community	loans				
	debt	•	•	ration agreement or divorce that you d	id not		
	Is the claim subject to offset?		•				
	■ No		•	g plans, and other similar debts			
	☐ Yes	Other. S	pecify Education	Loan			

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Debtor 1 Genita Wilson Case number (if know) 4.2 \$0.00 **ADT Security System** Last 4 digits of account number 6905 Nonpriority Creditor's Name 13528 S. Kenton Ave. When was the debt incurred? Chicago, IL 60445 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 **Capital One Bank** \$439.00 Last 4 digits of account number 6905 Nonpriority Creditor's Name P.O. Box 30281 When was the debt incurred? 07/29/2016 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 **Chase Auto Finance** Last 4 digits of account number 6905 \$9,000.00 Nonpriority Creditor's Name P.O. Box 901003 When was the debt incurred? 02/01/2017 Fort Worth, TX 76101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Automobile

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Debtor 1 Genita Wilson Case number (if know) 4.5 \$5,842.00 **Chase Card** Last 4 digits of account number 6905 Nonpriority Creditor's Name P.O. Box 15298 When was the debt incurred? 11/26/2013 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.6 ComEd Last 4 digits of account number 6905 \$175.00 Nonpriority Creditor's Name P.O. Box 6111 When was the debt incurred? 10/02/2014 Carol Stream, IL 60197 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Utility Bill** Other. Specify 4.7 **Cox Communications Phoenix** Last 4 digits of account number 6905 \$320.00 Nonpriority Creditor's Name 1550 W. Deer Valley Rd. When was the debt incurred? 04/19/2016 Phoenix, AZ 85027 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Account ☐ Yes

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Debtor 1 Genita Wilson Case number (if know) 4.8 \$52,009.00 Dept. of Edu./Navient Last 4 digits of account number 6905 Nonpriority Creditor's Name P.O. Box 9635 When was the debt incurred? 09/24/2015 Wilkes Barre, PA 18773 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify 4.9 **Finisterra Apartment Homes** 6905 \$12,895.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 02/01/2017 1250 W. Grove Parkway Tempe, AZ 85283 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Rental/Lease Other, Specify 4.1 **Great American Finance** 6905 \$1,154.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 201 W. Wacker Dr. When was the debt incurred? 12/11/2013 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Household Goods ☐ Yes

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Case number (if know)

Debtor 1 Genita Wilson 4.1 **IL Student Assist Comm** 6905 \$5,361.00 Last 4 digits of account number Nonpriority Creditor's Name 1755 Lake Cook Rd. When was the debt incurred? 05/06/2015 Deerfield, IL 60015 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Macy's Department Store** 6905 \$772.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 8218 When was the debt incurred? 04/05/2014 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 \$1,000.00 Mages & Price 6905 Last 4 digits of account number Nonpriority Creditor's Name 707 Lake Cook Rd. 314 When was the debt incurred? 02/01/2017 Deerfield, IL 60015 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Account ☐ Yes

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Genita Wilson		Case number (if know)	
Maricopa County West Tem	Last 4 digits of account number	8686	\$904.00
Nonpriority Creditor's Name 8240 S. Kyrene Rd.	When was the debt incurred?	02/01/2011	
Tempe, AZ 85284 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	<u> </u>		
At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other Specify Judgment		
Mokena Foot Ankle Clinic	Last 4 digits of account number	6905	\$110.00
Nonpriority Creditor's Name 19841 Wolf Rd. Mokena, IL 60448	When was the debt incurred?	10/20/2016	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
☐ Yes	Other. Specify Medical		
Progressive Medical Associates	Last 4 digits of account number	6905	\$460.00
Nonpriority Creditor's Name 1400 S. Dobson Rd.	When was the debt incurred?	05/12/2014	
Scottsdale, AZ 85257 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	, ,		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	■ Other Specify Medical		

Document Page 24 of 49 Debtor 1 Genita Wilson Case number (if know) 4.1 \$300.00 SYNCB/Old Navy 6905 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 965005 When was the debt incurred? 06/29/2014 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Synchrony Bank 6905 \$601.00 Last 4 digits of account number 8 Nonpriority Creditor's Name P.O. Box 105972 When was the debt incurred? 07/29/2015 Atlanta, GA 30348 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Account ☐ Yes 4.1 T-Mobile Bankruptcy Team 6905 \$545.00 9 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 53410 When was the debt incurred? 03/03/2014 Bellevue, WA 98015 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Cellular

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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Case number (if know) Debtor 1 Genita Wilson 4.2 Tribute 6905 \$1,000.00 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 105555 02/01/2017 When was the debt incurred? Atlanta, GA 30348 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Account ☐ Yes 4.2 **University of Phoenix** 6905 \$1,245.00 Last 4 digits of account number Nonpriority Creditor's Name 1625 W. Fountainhead Parkway When was the debt incurred? 06/25/2010 Tempe, AZ 85282 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Tuition Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Activity Collection Service** Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 664 N. Milwaukee Ave. #203B Part 2: Creditors with Nonpriority Unsecured Claims Prospect Heights, IL 60070 Last 4 digits of account number 6905 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Enhanced Recovery Company** Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 57547 Part 2: Creditors with Nonpriority Unsecured Claims Jacksonville, FL 32241 Last 4 digits of account number 6905 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? L J Ross Associates Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 1838 Part 2: Creditors with Nonpriority Unsecured Claims Ann Arbor, MI 48103 Last 4 digits of account number 6905 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Midland Funding LLC Line 4.18 of (Check one):

Official Form 106 E/F

2365 Northside Dr. 300

San Diego, CA 92108

☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

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Page 26 of 49 Case number (if know) Debtor 1 Genita Wilson Last 4 digits of account number 6905 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

National Credit System P.O. Box 312125 Atlanta, GA 31131

Last 4 digits of account number 6905

■ Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

			7	Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
6f	Student leans	6f		F7 270 00
OI.	Student loans	OI.	Ф	57,370.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	40,512.00
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	97,882.00
	6b. 6c. 6d. 6e. 6f. 6g. 6h.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6a. \$ 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

		1700.000	111 FAUE / / UL 4	
Fill in this infor	mation to identify your	case:		
Debtor 1	Genita Wilson			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the c er, Street, City, State and ZIP Co	ontract or lease	State what the contract or lease is for
2.1					
	Name				_
	Name				
	Number	Street			_
	City		State	ZIP Code	-
2.2	- ',				
	Name -				_
	Name				
	Number	Street			_
	rambor	Olioot			
	City		State	ZIP Code	_
	City		State	ZIF Code	
2.3					_
	Name				
					_
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				_
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5	0.1.9		0.0.0	2 0000	
2.5					_
	Name				
	Number	Street			_
	ivuilibei	Sueel			
					_
	City		State	ZIP Code	

		Docume	nt Page 28 d	of 49	
Fill in this	information to identify your	case:			
Debtor 1	Genita Wilson				
Dobto: 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	per				
(if known)				☐ Check if this	is an
				amended filir	ıg
Sched Codebtors Deople are	filing together, both are equ	re also liable for any deb ally responsible for supp	lying correct informat	s complete and accurate as possible. If two n ion. If more space is needed, copy the Additi o this page. On the top of any Additional Pag	onal Page,
our name	and case number (if known)	. Answer every question			·
1. Do y	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
Arizona No.	Go to line 3. Did your spouse, former spo	Nevada, New Mexico, Pu	erto Rico, Texas, Wash	y? (Community property states and territories incington, and Wisconsin.)	Jude
in line Form 1 out Co	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. List the persure you have listed the creditor on Schedule 6G). Use Schedule D, Schedule E/F, or Schedule Column 2: The creditor to whom you owe	D (Official dule G to fil
	lame, Number, Street, City, State and Z	IP Code		Check all schedules that apply:	; the debt
2.1				Cohodulo D. lino	
3.1	Name			□ Schedule D, line □ Schedule E/F, line	
				☐ Schedule C, line	
-					
	Number Street City	State	ZIP Code		
3.2				Cohodulo D. line	
	Name			□ Schedule D, line □ Schedule E/F, line	
				☐ Schedule E/F, line	
_					
	Number Street City	State	ZIP Code		
•	· y		0000		

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Eill	in this information to identify your o	250.				Ī				
	otor 1 Genita Wils									
	otor 2 ouse, if filing)				_					
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS		_					
(If kr	se number		-			□ Ar		ed filing ent showing	g postpetition ollowing date:	chapter
	fficial Form 106l chedule I: Your Inc					M	M / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	are married and not fili ar spouse is not filing w	ng jointly, and your sith you, do not inclu	spouse i de infori	is liv matic	ing with yon about	you, inclu your spo	ude inforn ouse. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed □ Not employed				☐ Employed ☐ Not employed			
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Par	ct 2: Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any l	line, write	\$0 in the	space. Inc	clude your noi	n-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for t	hat perso	n on the li	nes below. If	you need
						For Deb	tor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

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Deb	otor 1	Genita Wilson	-	C	ase	number (if known)				
						Debtor 1	non-f	ebtor iling s	pouse	
	Cop	by line 4 here	4.		\$_	0.00	\$		N/A	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	ā.	\$	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b).	\$_	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	50).	\$	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	\$		N/A	
	5e.	Insurance	5e	€.	\$	0.00	\$		N/A	
	5f.	Domestic support obligations	5f.		\$	0.00	\$		N/A	
	5g.	Union dues	5g	,	\$_	0.00	\$		N/A	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$	0.00	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	0.00	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	0.00	\$		N/A	
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a		\$_	0.00	\$		N/A	
	8b.	Interest and dividends	8b).	\$_	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$	0.00	\$		NI/A	
	8d.		80		\$ _	0.00	\$ 		N/A N/A	
	8e.	Social Security	86		_{\$} —	899.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Illinois Home Care	e 8f.		\$	3,095.00	\$		N/A	
	8g.	Pension or retirement income	_ 8g] .	\$ [—]	0.00	\$		N/A	
	8h.	Other monthly income. Specify:	_		\$_	0.00	+ \$		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		3,994.00	\$		N/A	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,994.00 + \$		N/A	= \$	3,994.00
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		5,994.00 + V		IN/A	_	3,334.00
11.	Sta Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not scify:	depe					hedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.		3,994.00
13.	Do	you expect an increase or decrease within the year after you file this form No.	?						Combin monthly	ed income
		Van Euglaine I								

Official Form 106I Schedule I: Your Income page 2

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Eill	in this informa	tion to identify yo	iir casa.			ı		
Deb		Genita Wilso				Che	eck if this is:	
DCD	101 1	Geriita Wiiso	11				An amended filing	
	tor 2 buse, if filing)						A supplement show 13 expenses as of	wing postpetition chapter the following date:
` '	,	untay Court for the	NODTL	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Unit	ed States Bankr	uptcy Court for the:	NORTE	TERN DISTRICT OF ILLIN	OIS		WIWI / DD / TTTT	
	e numbe r nown)							
		rm 106J						
		J: Your E						12/1
info	rmation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to	line 2. s Debtor 2 live i	n a canar	ata haysahald?				
	□ res. Doe		n a separ	ate nousenoid?				
			t file Offic	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Del	btor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter			Yes
					Son		20	□ No ■ Yes
								■ res
								☐ Yes
								□ No
_	_							☐ Yes
3.		enses include f people other th	าลท	No				
		d your depender		Yes				
Par	t 2: Estim	ate Your Ongoir	ng Month	ly Expenses				
exp	imate your ex	penses as of yo	our bankr	uptcy filing date unless y y is filed. If this is a supp				
the	value of such	n assistance and		government assistance i			.,	
(Off	ficial Form 10	61.)					Your exp	enses
4.		or home owners! and any rent for the		ses for your residence. I	nclude first mortgag	e 4.	\$	0.00
	If not includ	ed in line 4:						
	4a. Real e	estate taxes				4a.	\$	333.00
	4b. Prope	rty, homeowner's	, or renter	's insurance		4b.	·	108.00
				upkeep expenses		4c.	·	0.00
5.		owner's associati		dominium dues our residence, such as ho	me equity loans	4d. 5.	·	0.00

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Ditilities:	83.00 300.00 0.00 200.00 0.00 0.00 100.00 0.00 40.00 0.00 0.00 0.00 0.00 0.00
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17c. Other. Specify: 17d. Other sp	83.00 300.00 300.00 200.00 0.00 0.00 100.00 40.00 0.00 0.00 0
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. 15d. Other insurance, specify: 15d. Specify: 15d. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106l). Other payments or unable to support others who do not live with you. Specify: Employee Wage 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Sec. Property, homeowner's, or renter's insurance	300.00 0.00 0.00 0.00 0.00 0.00 0.00 0.
6d. Other. Specify: 6d. \$ Food and housekeeping supplies 7. \$ Childcare and children's education costs 8. \$ Clothing, laundry, and dry cleaning 9. \$ Personal care products and services 10. \$ Medical and dental expenses 11. \$ Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ Charitable contributions and religious donations 14. \$ Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$ 15a. Life insurance 15b. \$ 15c. Vehicle insurance 15c. \$ 15c. Vehicle insurance 9. \$ 15c. \$ 15c. Vehicle insurance 9. \$ 15d. \$ 15c. Vehicle insurance 9. \$ 15d. \$ 15d. Other insurance. Specify: 15d. \$ 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$ 15b. Hastallment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 17b. Car payments for Vehicle 1 17a. \$ 17c. Other. Specify: 17c. \$ 17d. Other. Specify: 17c. \$ 17d. Other. Specify: 17c. \$ 17d. Other. Specify: 17d. \$ 17d. Other. Specify: 17d. \$ 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, \$\$ Schedule I, Your Income (Official Form 106I). \$ 18. \$ 00ther payments you make to support others who do not live with you. \$ 18. \$ 00ther real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your 20a. \$ 20a. Mortgages on other property 20a. \$ 20b. \$ 20c. Property, homeowner's, or renter's insurance 20c. \$ 20d. Maintenance, repair, and upkeep expenses 20d. \$ 20d. Homeowner's association or condominium dues 20e. \$ 20d. Homeowner's association 20e. \$ 20d. \$ 20d. Homeowner's association 20e. \$ 20d. \$ 20d. Homeowner's association 20e. \$ 20d. \$ 20d. \$ 20d. Homeowner's association 20e. \$ 20d.	0.00 200.00 0.00 0.00 0.00 0.00 0.00 0.
Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insura	200.00 0.00 0.00 0.00 0.00 0.00 0.00 0.
Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17ax	0.00 0.00 100.00 0.00 0.00 0.00 0.00 0.
Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses 11. \$ Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17c. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Specify: Employee Wage 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. \$ 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20d. Bone of the service of	0.00 100.00 0.00 0.00 0.00 0.00 0.00 0.
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20e. Homeowner's association or condominium dues 20e. \$	
·	
64 6 7	
Other: Specify: 21. +	-\$ 0.00
Calculate your monthly expenses	
22a. Add lines 4 through 21.	\$ 3,214.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ 3,214.00
Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$	3,994.00
23b. Copy your monthly expenses from line 22c above. 23b\$	
22a Subtract your monthly expanses from your monthly income	
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . 23c. \$\\$	780.00
Do you expect an increase or decrease in your expenses within the year after you file this for example, do you expect to finish paying for your car loan within the year or do you expect your mortgage pay modification to the terms of your mortgage?	
	yment to increase or decrease because of a
■ No. □ Yes. Explain here:	yment to increase or decrease because of a

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Fill in this info	rmation to identify your	case:				
Debtor 1	Genita Wilson					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States E	Sankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS			
Case number (if known)					☐ Check if this is an amended filing	
Official For	m 106Dec					
Declara	tion About a	an Individua	I Debtor's S	Schedules	12/1	5
years, or both.	ey or property by fraud i 18 U.S.C. §§ 152, 1341, 1 gn Below		nkruptcy case can resu	ilt in fines up to \$250,0	00, or imprisonment for up to 20	
Did you p	ay or agree to pay some	one who is NOT an atte	orney to help you fill ou	it bankruptcy forms?		
■ No						
☐ Yes.	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119	
	alty of perjury, I declare	that I have read the su	mmary and schedules f	filed with this declarati	on and	
X /s/ Ge	enita Wilson		X			
Genit	a Wilson ure of Debtor 1		Signature	of Debtor 2		

Date _____

Date March 22, 2017

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Fill in	this inform	ation to identify you	r case:			
Debtor	r 1	Genita Wilson				
		First Name	Middle Name	Last Name		
Debtor (Spouse		First Name	Middle Name	Last Name		
United	States Ban	kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
_		mapto, countro mo				
Case r	number				_	Check if this is an mended filing
Offic	cial For	m 107				
			Affairs for Indivi	duals Filing for B	ankruptcy	4/10
inform	ation. If mo r (if known)	re space is needed, . Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup y additional pages, write you	plying correct ur name and case
		current marital statu				
□	Married Not marri	ed				
2. Dı	uring the las	st 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. List	all of the places you l	ived in the last 3 years. Do n	ot include where you live now	<i>ı</i> .	
D	ebtor 1 Prid	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor ico, Texas, Washington and V	
=	No Vos Mak	e sure vou fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H)		
	1 CS. Mar	e sale you illi out oci	leddie 11. Todi Codebiois (O	iliciai i oitii 10011).		
Part 2	Explain	the Sources of You	r Income			
Fil	ll in the total	amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	l No					
-		n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$6,218.36	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Document Debtor 1 Genita Wilson

						514 4				5.17		
						Debtor 1				Debtor 2		
				of income that apply.		s income e deductions and sions)		Sources of income Check all that apply. Gross in (before of and excl.)				
		t calen y 1 to			31, 2016)	■ Wages bonuses,	s, commissions, tips		Unknown	☐ Wages, co bonuses, tips	mmissions,	
						■ Opera	ting a business			☐ Operating	a business	
					fore that: 31, 2015)	■ Wages bonuses,	s, commissions, tips		\$15,833.00	☐ Wages, co bonuses, tips	mmissions,	
						■ Opera	ting a business			☐ Operating	a business	
		calen y 1 to			31, 2014)	■ Wages bonuses,	s, commissions, tips		\$17,874.00	☐ Wages, co bonuses, tips	mmissions,	
						■ Opera	ting a business			☐ Operating	a business	
	and win	other nings. each	publi If you	c bene u are fili	it payments; ng a joint cas he gross inco	pensions; rese and you l	ental income; intenave income that	rest; divid you recei		cted from lawsuits only once under [s; royalties; ar Debtor 1.	Security, unemployment, nd gambling and lottery
						Debtor 1				Debtor 2		
							of income pelow.	each	s income from source e deductions and sions)	Sources of in Describe belo		Gross income (before deductions and exclusions)
Pa	rt 3:	Lis	t Cer	tain Pa	yments You	Made Befo	ore You Filed for	Bankrup	tcy			
6.	Are	eithe No.	Nei	ther De	ebtor 1 nor E	ebtor 2 ha	imarily consume s primarily consu amily, or househo	umer deb		ts are defined in 1	1 U.S.C. § 10	01(8) as "incurred by an
			Dur	ina the	90 days befo	re vou filed	for bankruptcy, d	id vou pa	y any creditor a tota	al of \$6.425* or m	ore?	
				No.	Go to line 7		, ,		•			
				Yes Subject	paid that cr not include	editor. Do n payments t	ot include paymer o an attorney for t	nts for do his bankr	mestic support obliq	gations, such as o	child support a	the total amount you and alimony. Also, do t.
	•	Yes.					e primarily consumor for bankruptcy, d		ts. y any creditor a tota	al of \$600 or more	· • ?	
				No.	Go to line 7	' .						
				Yes	include pay		omestic support o		of \$600 or more an s, such as child sup			at creditor. Do not include payments to an
Creditor's Name and Address					Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for		

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Case number (if known) Document Debtor 1 Genita Wilson

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.									
	■ No									
	☐ Yes. List all payments to an insider.									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment				
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a d	ebt that benefited an				
	■ No									
	☐ Yes. List all payments to an insider									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name				
Pa	rt 4: Identify Legal Actions, Repossession	ns. and Foreclosures								
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.									
	Case title Case number	Nature of the case	Court or agency		Status of th	e case				
10.	Within 1 year before you filed for bankrupt. Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below.		erty repossessed, f	foreclosed, garnis	shed, attached	i, seized, or levied?				
	Creditor Name and Address	Describe the Property		Date		Value of the				
		Explain what happene	d			property				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No Yes. Fill in the details.		luding a bank or fil	nancial institution	ı, set off any a	nmounts from your				
	Creditor Name and Address		Date action was Amount taken							
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assigne	e for the bene	efit of creditors, a				
Pa	tt 5: List Certain Gifts and Contributions									
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	0 per person'	?				
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value				
	Person to Whom You Gave the Gift and Address:									

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Nο

> Person Who Received Transfer Address

Yes. Fill in the details.

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Debtor 1 **Genita Wilson**

19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No.		y property to a	self-settle	d trust or similar device	of wh	ich you are a
	Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Dat	te Transfer was de
Par	t 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and St	orage Unit	s		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accou	nts; certificates	of deposi		-	
	Yes. Fill in the details.						
		Last 4 digits of account number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	be	Last balance efore closing or transfer
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents		Do you still nave it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents			Do you still nave it?
Par	t 9: Identify Property You Hold or Control fo	or Someone Else					
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ude any proper	ty you bor	rowed from, are storing	for, o	hold in trust
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property		Value
Par	t 10: Give Details About Environmental Inform	mation					
For	the purpose of Part 10, the following definition	ns apply:					
			.1. (!				.

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Genita Wilson

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of a	ny release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admi	nistrative proceeding under any enviro	onmental law? Include settlements a	ind orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	11: Give Details About Your Business or Co	onnections to Any Business					
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have any	of the following connections to any	business?			
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	No. None of the above applies. Go to Part 12.						
	Yes. Check all that apply above and fill in the details below for each business.						
		Describe the nature of the business	Employer Identification number				
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security in Dates business existed	number or IIIN.			
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	/, did you give a financial statement to	anyone about your business? Inclu	de all financial			
	■ No □ Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					

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Part 12: Sign Below	
are true and correct. I understand tha	ent of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers making a false statement, concealing property, or obtaining money or property by fraud in connectio es up to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Genita Wilson	
Genita Wilson	Signature of Debtor 2
Signature of Debtor 1	
Date March 22, 2017	Date
Did you attach additional pages to Yo	Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
□ Yes	
Did you pay or agree to pay someone	rho is not an attorney to help you fill out bankruptcy forms?
■ No	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-09136 Doc 1 Filed 03/22/17 Entered 03/22/17 17:45:10 Desc Main Document Page 45 of 49

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Genita Wilson		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENS	SATION OF ATTOR	NEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of of the debtor (s).	of the petition in bankruptcy, o	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	800.00
	Prior to the filing of this statement I have received		\$	500.00
	Balance Due		\$	300.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compens	sation with any other person u	inless they are memb	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name.			
5.	In return for the above-disclosed fee, I have agreed to rend	er legal service for all aspects	of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statemed c. Representation of the debtor at the meeting of creditors d. [Other provisions as needed] Negotiations with secured creditors to redefirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house 	ent of affairs and plan which and confirmation hearing, and luce to market value; exerts as needed; preparation a	may be required; d any adjourned hear mption planning;	rings thereof; preparation and filing of
6.	By agreement with the debtor(s), the above-disclosed fee dependence in any discharge any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	greement or arrangement for p	payment to me for re	epresentation of the debtor(s) in
	March 22, 2017	/s/ Tina Tran		
1	Date	Tina Tran 6321638 Signature of Attorney		
		Needle & Thread L	aw LLC	
		9212 South Stony Chicago, IL 60617		
		(773) 609-3637 Fa	ax: (872) 228-0121	I
		ttran@needlethrea	adlaw.com	
1				

United States Bankruptcy Court Northern District of Illinois

In re	Genita Wilson		Case No.	
		Debtor(s)	Chapter 13	
	VE	RIFICATION OF CREDITOR N	MATRIX	
		Number of	f Creditors:	32
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credi	itors is true and correct to th	ne best of my
Date:	March 22, 2017	/s/ Genita Wilson Genita Wilson		

ACS/Goal Financial 501 Bleeker St. Utica, NY 13501

Activity Collection Service 664 N. Milwaukee Ave. #203B Prospect Heights, IL 60070

ADT Security System 13528 S. Kenton Ave. Chicago, IL 60445

Ally Financial P.O. Box 380903 Minneapolis, MN 55438

Capital One Bank P.O. Box 30281 Salt Lake City, UT 84130

Certegy Check Service P.O. Box 30046 Tampa, FL 33630

Chase Auto Finance P.O. Box 901003 Fort Worth, TX 76101

Chase Card P.O. Box 15298 Wilmington, DE 19850

Chex System 7805 Hudson Rd. Woodberry, MN 55125

ComEd P.O. Box 6111 Carol Stream, IL 60197

Cox Communications Phoenix 1550 W. Deer Valley Rd. Phoenix, AZ 85027

Dept. of Edu./Navient P.O. Box 9635 Wilkes Barre, PA 18773

Enhanced Recovery Company P.O. Box 57547 Jacksonville, FL 32241

Equifax Bankruptcy Department P.O. Box 740241 Atlanta, GA 30374

Experian Bankruptcy Department P.O. Box 2002 Allen, TX 75013

Finisterra Apartment Homes 1250 W. Grove Parkway Tempe, AZ 85283

Great American Finance 201 W. Wacker Dr. Chicago, IL 60606

IL Student Assist Comm 1755 Lake Cook Rd. Deerfield, IL 60015

L J Ross Associates P.O. Box 1838 Ann Arbor, MI 48103

Macy's Department Store P.O. Box 8218 Mason, OH 45040

Mages & Price 707 Lake Cook Rd. 314 Deerfield, IL 60015

Maricopa County West Tem 8240 S. Kyrene Rd. Tempe, AZ 85284 Midland Funding LLC 2365 Northside Dr. 300 San Diego, CA 92108

Mokena Foot Ankle Clinic 19841 Wolf Rd. Mokena, IL 60448

National Credit System P.O. Box 312125 Atlanta, GA 31131

Progressive Medical Associates 1400 S. Dobson Rd. Scottsdale, AZ 85257

SYNCB/Old Navy P.O. Box 965005 Orlando, FL 32896

Synchrony Bank P.O. Box 105972 Atlanta, GA 30348

T-Mobile Bankruptcy Team P.O. Box 53410 Bellevue, WA 98015

Trans Union Bankruptcy Department P.O. Box 1000 Chester, PA 19022

Tribute P.O. Box 105555 Atlanta, GA 30348

University of Phoenix 1625 W. Fountainhead Parkway Tempe, AZ 85282